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06/25/2003

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Cheryl Ann Rogers

(Depositor's name)

Cheryl Rogers

(Signature)

September 23 2003

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/635,130	04/19/1996	INGRID W. CARAS	P1001	1155

*TITLE OF INVENTION: AL-2 NEUROTROPHIC FACTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	09/25/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
DUFFY, PATRICIA ANN	1645	536-023400

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Atulya Agarwal, Ph.D.

2. Ginger R. Dreger, Esq.
Heller Ehrman White

3. & McAuliffe LLP

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

GENENTECH, INC.

South San Francisco, CA

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 8-1641 (enclose an extra copy of this form).

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(Authorized Signature) Ginger R. Dreger (Date) 9/23/03
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